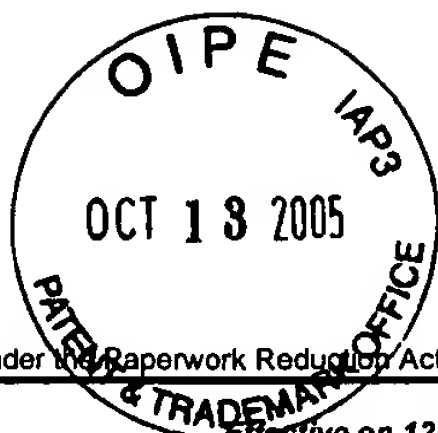


MS AF
REPLY UNDER 37 C.F.R. § 1.116
EXPEDITED PROCEDURE
EXAMINING GROUP

Handwritten signature/initials

AMENDMENT TRANSMITTAL LETTER				Docket No. 0905-0256P																																											
Application No. 09/769,513-Conf. #6116	Filing Date January 26, 2001	Examiner Y. K. Aggarwal	Art Unit 2615																																												
Applicant(s): Toshiharu UENO																																															
Invention: IMAGE SENSING APPARATUS AND METHOD OF CONTROLLING OPERATION OF SAME																																															
<p>MS AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450</p> <p>Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.</p> <table border="1" style="width: 100%; border-collapse: collapse;"><thead><tr><th colspan="6" style="text-align: center;">CLAIMS AS AMENDED</th></tr><tr><th></th><th style="text-align: center;">Claims Remaining After Amendment</th><th style="text-align: center;">Highest Number Previously Paid</th><th style="text-align: center;">Number Extra Claims Present</th><th style="text-align: center;">Rate</th><th></th></tr></thead><tbody><tr><td>Total Claims</td><td style="text-align: center;">33</td><td style="text-align: center;">- 20 =</td><td style="text-align: center;">13</td><td style="text-align: center;">x 50.00</td><td style="text-align: right;">650.00</td></tr><tr><td>Independent Claims</td><td style="text-align: center;">4</td><td style="text-align: center;">- 3 =</td><td style="text-align: center;">1</td><td style="text-align: center;">x 200.00</td><td style="text-align: right;">200.00</td></tr><tr><td colspan="5">Multiple Dependent Claims (check if applicable) <input type="checkbox"/></td><td></td></tr><tr><td colspan="5">Other fee (please specify):</td><td></td></tr><tr><td colspan="5">TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</td><td style="text-align: right;">850.00</td></tr></tbody></table> <p><input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity</p> <p><input type="checkbox"/> No additional fee is required for this amendment.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> A check in the amount of \$ <u>850.00</u> to cover the filing fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>02-2448</u> as described below. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> Credit any overpayment.</p> <p><input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.</p> <div style="display: flex; justify-content: space-between; align-items: flex-end;"><div style="width: 60%;"><p><i>Michael R. Cammarata</i> _____ Michael R. Cammarata Attorney Reg. No.: 39,491</p><p>BIRCH, STEWART, KOLASCH & BIRCH, LLP 8110 Gatehouse Rd Suite 100 East P.O. Box 747 Falls Church, Virginia 22040-0747 (703) 205-8000</p></div><div style="width: 35%; text-align: right;"><p>Dated: <u>October 13, 2005</u></p></div></div>						CLAIMS AS AMENDED							Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate		Total Claims	33	- 20 =	13	x 50.00	650.00	Independent Claims	4	- 3 =	1	x 200.00	200.00	Multiple Dependent Claims (check if applicable) <input type="checkbox"/>						Other fee (please specify):						TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					850.00
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Other fee (please specify):																																															
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					850.00																																										



PTO/SB/17 (12-04v2)
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FEE TRANSMITTAL For FY 2005 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Complete if Known		
		Application Number	09/769,513-Conf. #6116	
		Filing Date	January 26, 2001	
		First Named Inventor	Toshiharu UENO	
		Examiner Name	Y. K. Aggarwal	
TOTAL AMOUNT OF PAYMENT (\$)		850.00	Art Unit	2615
			Attorney Docket No.	0905-0256P

METHOD OF PAYMENT (check all that apply)	
<input checked="" type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify): _____	
<input type="checkbox"/> Deposit Account	Deposit Account Number: 02-2448
Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
		Small Entity		Small Entity		Small Entity	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES							
						Small Entity	
						Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		
33 - 20 =		13	x 50.00 =	650.00			
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)			
4 - 3 =		1	x 200.00 =	200.00			
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)		
	- 100 =	/50	(round up to a whole number) x				
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)						Fees Paid (\$)	
Other (e.g., late filing surcharge):							

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	39,491
Name (Print/Type)	Michael R. Cammarata	Telephone	(703) 205-8000
		Date	October 13, 2005



Appl No: 09/769,513
Attorney Docket: 0905-0256P

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: T. UENO Conf.: 6116
Appl No: 09/769,513 Art Unit: 2615
Filed: January 26, 2001 Examiner: Y. Aggarwal
For: IMAGE SENSING APPARATUS AND METHOD OF
CONTROLLING OPERATION OF SAME

REPLY UNDER 37 C.F.R. § 1.116

MS AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

October 13, 2005

Sir:

In reply to the Examiner's Final Office Action dated July 13, 2005, the following amendments and remarks are respectfully submitted in connection with the above-identified application as follows:

- Amendments to the claims; and
- Remarks/Arguments.

10/14/2005 SZEWDIE1 00000016 09769513

01 FC:1201
02 FC:1202

200.00 DP
650.00 DP